

Application Data Sheet**Application Information**

Application Type:: Regular  
Subject Matter:: Utility  
Suggested Classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?:: None  
Number of CD disks::  
Number of Copies of CDs::  
Sequence Submission?:: None  
Computer Readable Form (CRF):: No  
Number of copies of CRF:: 0  
Title:: GASKET MATERIAL  
Attorney Docket Number:: 8035-1021  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 15  
Small Entity?:: No  
Latin Name::  
Variety Denomination Name::  
Petition Included?:: No  
Petition Type::  
Licensed US Gov't Agency::  
Contract or Grant Numbers::  
Secrecy Order in Parent Appl.?:: No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: JAPAN  
Status:: Full Capacity  
Given Name:: YASUNORI  
Middle Name::  
Family Name:: MURAKAMI  
Name Suffix::  
City of Residence:: WAKO-SHI  
State or Province of Residence::  
Country of Residence:: JAPAN  
Street of Mailing Address:: 4-1, CHUO 1-CHOME  
Address:: SAITAMA  
City of Mailing Address:: WAKO-SHI  
State or Province of Mailing Address::  
Country of Mailing Address:: JAPAN  
Postal or Zip Code of Mailing Address:: 351-0193

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: JAPAN  
Status:: Full Capacity  
Given Name:: MASAMUNE  
Middle Name::  
Family Name:: TABATA  
Name Suffix::  
City of Residence:: WAKO-SHI  
State or Province of Residence::  
Country of Residence:: JAPAN  
Street of Mailing Address:: 4-1, CHUO 1-CHOME  
Address:: SAITAMA  
City of Mailing Address:: WAKO-SHI

State or Province of Mailing Address::  
Country of Mailing Address:: JAPAN  
Postal or Zip Code of Mailing Address:: 351-0193

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: JAPAN  
Status:: Full Capacity  
Given Name:: YOSHIAKI  
Middle Name::  
Family Name:: HAMADA  
Name Suffix::  
City of Residence:: SAITAMA-SHI  
State or Province of  
Residence::  
Country of Residence:: JAPAN  
Street of Mailing 24-17, HARAYAMA 2-CHOME  
Address:: SAITAMA  
City of Mailing Address:: SAITAMA-SHI  
State or Province of Mailing Address::  
Country of Mailing Address:: JAPAN  
Postal or Zip Code of Mailing Address:: 336-0931

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: JAPAN  
Status:: Full Capacity  
Given Name:: KOJI  
Middle Name::  
Family Name:: AKIYOSHI  
Name Suffix::  
City of Residence:: SAITAMA-SHI  
State or Province of  
Residence::  
Country of Residence:: JAPAN  
Street of Mailing 24-17, HARAYAMA 2-CHOME

Address:: SAITAMA  
City of Mailing Address:: SAITAMA-SHI  
State or Province of Mailing Address::  
Country of Mailing Address:: JAPAN  
Postal or Zip Code of Mailing Address:: 336-0931

**Correspondence Information**

Correspondence Customer 00466  
Number::

**Representative Information**

Representative Customer	00466
Number::	

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/JP03/05547	4/30/03

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
JAPAN	2002-196714	7/5/02	Yes
JAPAN	2002-196827	7/5/02	Yes
JAPAN	2002-196972	7/5/02	Yes
JAPAN	2002-196980	7/5/02	Yes

**Assignment Information**

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::